

86th Legislative Session – 2011

Committee: House Health and Human Services

Tuesday, February 22, 2011

P - Present
E - Excused
A - Absent

Roll Call

P Blake
P Haggard
P Hawley
P Hickey
E Iron Cloud III
E Jensen
P Lucas
P Magstadt
P Sly
P Steele
P Stricherz
P Munsterman, Vice-Chair
P Boomgarden, Chair

OTHERS PRESENT: See Original Minutes

The meeting was called to order by Representative Boomgarden, Chair.

MOTION: TO APPROVE THE MINUTES OF THURSDAY, FEBRUARY 17, 2011

Moved by: Lucas
Second by: Hickey
Action: Prevailed by voice vote.

HB 1172: require the issuance of a request for proposals concerning the administration of the Medicaid program.

Presented by: Representative Scott Munsterman (Handout: 1)
Opponents: Kim Malsam-Rysdon, Department of Social Services
Deb Bowman, Office of the Governor

Sam Wilson, AARP, Sioux Falls
Ken Senger, SD Association of Healthcare Organizations
Deb Fischer Clemens, Avera Health

MOTION: AMEND HB 1172

1172jb

On page 1, line 10, of the printed bill, delete everything after "." and insert "The department shall report any findings, along with any legislative proposals, to the 2012 Legislature.

Section 2. The Department of Social Services shall issue a request for information concerning issues related to the delivery models that may be used to meet the needs of exempt Medicaid participants, children receiving Medicaid, and adults receiving Medicaid including the development of a benchmark plan with the private sector for those adults receiving Medicaid. The department shall report any findings, along with any legislative proposals, to the 2012 Legislature."

On page 1, delete lines 11 to 13, inclusive.

Moved by: Sly
Second by: Magstadt
Action: Prevailed by voice vote.

MOTION: DO PASS HB 1172 AS AMENDED

Moved by: Hickey
Second by: Stricherz
Action: Failed by roll call vote. (5-6-2-0)

Voting Yes: Haggar, Hickey, Steele, Stricherz, Munsterman

Voting No: Blake, Hawley, Lucas, Magstadt, Sly, Boomgarden

Excused: Iron Cloud III, Jensen

MOTION: DEFER HB 1172 TO THE 41ST LEGISLATIVE DAY

Moved by: Lucas
Second by: Blake
Action: Failed by roll call vote. (6-5-2-0)

Voting Yes: Blake, Hawley, Lucas, Magstadt, Sly, Boomgarden

Voting No: Haggar, Hickey, Steele, Stricherz, Munsterman

Excused: Iron Cloud III, Jensen

MOTION: TO TABLE HB 1172

Moved by: Steele

Second by: Sly

Action: Prevailed by roll call vote. (7-4-2-0)

Voting Yes: Blake, Hawley, Lucas, Magstadt, Sly, Steele, Boomgarden

Voting No: Haggar, Hickey, Stricherz, Munsterman

Excused: Iron Cloud III, Jensen

HB 1134: provide for certain revisions to the medicaid program.

Presented by: Representative Scott Munsterman (Handout: 1)

Proponents: Tom Scheinost, SD Association of Community Based Services

Opponents: Dave Hewett, SD Association of Healthcare Organizations
Terrance Dosch, SD Council of Mental Health Centers
Brett Koenecke, SD State Medical Association
Kitty Kinsman, South Dakota Childrens Care Hospital and School
Paul Knecht, SD Dental Association
Deb Bowman, Office of the Governor

MOTION: AMEND HB 1134

1134jc

On the printed bill, delete everything after the enacting clause and insert:

"Section 1. For fiscal year 2012, each facility's reduction in Medicaid shall be based on the facility's reimbursement for fiscal year 2010 from Medicaid as follows:

- (1) For any facility receiving more than eighty percent reimbursement from Medicaid, no reduction;

- (2) For any facility receiving sixty-six percent to eighty percent reimbursement from Medicaid, one percent reduction;
- (3) For any facility receiving sixty-three percent or more but less than sixty-six percent reimbursement from Medicaid, one and one half percent reduction;
- (4) For any facility receiving sixty-one percent or more but less than sixty-three percent reimbursement from Medicaid, two percent reduction;
- (5) For any facility receiving fifty-nine percent or more but less than sixty-one percent reimbursement from Medicaid, two and one half percent reduction;
- (6) For any facility receiving fifty-seven percent or more but less than fifty-nine percent reimbursement from Medicaid, three percent reduction;
- (7) For any facility receiving fifty-four percent or more but less than fifty-seven percent reimbursement from Medicaid, five percent reduction;
- (8) For any facility receiving fifty-two percent or more but less than fifty-four percent reimbursement from Medicaid, seven percent reduction;
- (9) For any facility receiving forty-nine percent or more but less than fifty-two percent reimbursement from Medicaid, nine percent reduction;
- (10) For any facility receiving forty-four percent or more but less than forty-nine percent reimbursement from Medicaid, eleven percent reduction;
- (11) For any facility receiving less than forty-four percent reimbursement from Medicaid, thirteen percent reduction.

Section 2. The provider fee schedule for Medicaid shall be based on a percentage of the amount listed in the Medicare physician fee schedule, the 2011 National Physician Fee Schedule Relative Value File, if the service is listed. If the service is not listed in the schedule, reimbursement shall be made according to a model based on reported costs."

Moved by: Stricherz
Second by: Haggar
Action: Prevailed by voice vote.

MOTION: DO PASS HB 1134 AS AMENDED

Moved by: Sly
Second by: Stricherz
Action: Prevailed by roll call vote. (9-2-2-0)

Voting Yes: Haggar, Hawley, Hickey, Magstadt, Sly, Steele, Stricherz, Munsterman, Boomgarden

Voting No: Blake, Lucas

Excused: Iron Cloud III, Jensen

MOTION: ADJOURN

Moved by: Sly
Second by: Steele
Action: Prevailed by voice vote.

Joshua Klumb
Committee Secretary

Jamie Boomgarden, Chair